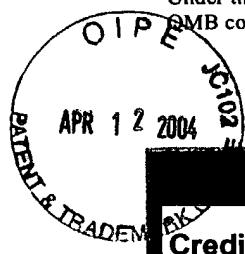


Approved for use through 01/31/2003. OMB 0651-0043

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OMB control number.**United States Patent & Trademark Office****Credit Card Payment Form****Please Read Instructions before Completing this Form****Credit Card Information**

Credit Card Type: Visa MasterCard American Express Discover

Credit Card Account #: XXXX XXXX XXXX XXXX

Credit Card Expiration Date: XX-XX

Name as it Appears on Credit Card: XXXXX XXXXX

Payment Amount: \$(US Dollars): \$ 640.00

Signature: **Void Void Void Void Void** Date: January 15, 2004

Refund Policy: The Office may refund a fee paid by mistake or in excess of that required. A change in circumstances after the payment of a fee will not entitle a party to a refund of such fee. The Office will not refund amounts of twenty-five dollars or less unless a refund is specifically requested, and will not notify the payor of such amounts (37 CFR 1.26). Refund of a fee paid by credit card will be via credit to the credit card account.

Service Charge: There is a 50.00 service charge for processing each payment refused (including a check deemed "bounced") or charged back by a financial institution (37 CFR 1.21(m)).

Credit Card Billing Address

Street Address 1: 2200 Wells Fargo Center

Street Address 2: 90 South Seventh Street

City: Minneapolis

State: MN Zip/Postal Code: 55402-3901

Country: USA

Daytime Phone #: 612/766-1000 Fax #: 612/766-1600

Request and Payment Information**Description of Request and Payment Information:**

Notice of Appeal (\$160.00) and 3-Month Extension of Time (\$475.00) for small entity

<input checked="" type="checkbox"/> Patent Fee	<input type="checkbox"/> Patent Maintenance Fee	<input type="checkbox"/> Trademark Fee	<input type="checkbox"/> Other Fee
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Application No.
09/912,078

Patent No.

Attorney Docket No.
67228-274933

Application No.

Serial No.

Registration No.

Identify or Describe Mark

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